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CUBIST PHARMA

002

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34103 7590 09/20/2004

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<i>Timothy J. Douros</i>	(Depositor's name)
<i>Timothy J. Douros</i>	(Signature)
December 17, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/082,544	02/20/2002	Frederick B. Oleson JR.	-CUB-1 CON-	8363

TITLE OF INVENTION: METHODS FOR ADMINISTRATION OF ANTIBIOTICS

C053/02 65

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	12/20/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHOI, FRANK I	1616	514-009000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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- 1 Timothy J. Douros
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

CUBIST PHARMACEUTICALS, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Lexington, MA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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5. Change in Entity Status (from status indicated above)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date

December 17, 2004

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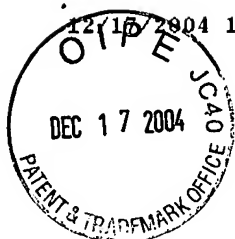
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41,716

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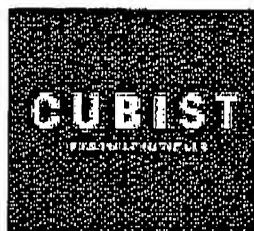
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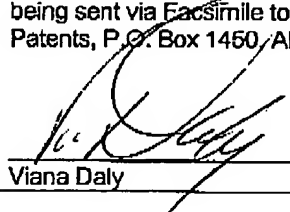
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Viana Daly


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